

2017 HELP: The Backpack Project
Application for School Supplies Assistance for Baraboo School District Students

Are you eligible?

1. Your child/children **MUST** attend Baraboo schools.
2. Your total gross monthly income should be at or below 200% of the Federal Poverty Index. (see chart for amounts per household size)

3. **OR** you may have one or more of the following special conditions. (please indicate)
 Grandparent with custody of grandchildren
 Living in a shelter (Hope House, Homeless Shelter)
 Are homeless
 Are sharing a residence with another family due to loss of housing
 Child is a foster child
 Other extenuating circumstances
 (Please call)

Household Size	Gross Monthly Income
2	\$ 2,706.00
3	\$3,403.00
4	\$4,100.00
5	\$4,796.00
6	\$5,493.00
7	\$6,190.00
8	\$6,886.00

Any questions, please call Becky at (608) 963-8230.

Please fill out completely:

Your Name: _____ Phone: _____
 Address: _____ City: _____ Zip: _____
 Email: _____ May we use this to contact you? Yes No
 (instead of "snail mail")

Household Information – List **ALL** household members below:

Adults – 18 and over: (If you need more space, please use separate sheet of paper and attach.)

1. Name: _____ Relationship to you: Self Birthdate: _____
 Employed? Yes No Where: _____ Weekly earnings: _____
2. Name: _____ Relationship to you: _____ Birthdate: _____
 Employed? Yes No Where: _____ Weekly earnings: _____
3. Name: _____ Relationship to you: _____ Birthdate: _____
 Employed? Yes No Where: _____ Weekly earnings: _____

Additional Sources of Income: (please indicate all amounts per month)

Self Employment: _____	Unemployment Comp: _____
Worker's Comp: _____	W-2 or FSET: _____
Child Support: _____	Social Security: _____
Disability or SSI: _____	Family Assistance (TANF): _____
Pension: _____	Other: (type) _____
	(amount) _____

Housing Expense: Rent/Mortgage/Lot Rent Amount: _____

(over)

Children under 18: (if you need more space, please use separate sheet of paper and attach.)

1. Name: _____ Relationship to you: _____ Birthdate: _____
School attending: _____ Grade as of August 2016: _____
2. Name: _____ Relationship to you: _____ Birthdate: _____
School attending: _____ Grade as of August 2016: _____
3. Name: _____ Relationship to you: _____ Birthdate: _____
School attending: _____ Grade as of August 2016: _____
4. Name: _____ Relationship to you: _____ Birthdate: _____
School attending: _____ Grade as of August 2016: _____
5. Name: _____ Relationship to you: _____ Birthdate: _____
School attending: _____ Grade as of August 2016: _____

I certify by my signature below that the information I have provided is true and correct to the best of my knowledge. I understand that the information will be used to determine my eligibility for assistance. I further understand that if I am found to have knowingly falsified any information, I may be refused further assistance from The Backpack Project. I hereby authorize release of necessary information from any source for verification purposes.

Signature: _____ Date: _____

This application must be received before July 31, 2017.

Questions? Call Becky at (608) 963-8230. Email: hivebiz@centurytel.net

Please return application to boxes located at:

⇒ Viking Express Market

⇒ Recycled Sally's

⇒ Scan and email to: hivebiz@centurytel.net

⇒ or mail to: Backpack Project, 717 Ridge Street, Baraboo, WI 53913

**You will receive a ticket to the event as confirmation of acceptance and you must have this ticket to be admitted into the event, which will be held in mid-August.

This is not a school-sponsored activity and the Baraboo School District does not fund or endorse this program/activity. It is a component fund of the Greater Sauk County Community Foundation named HELP: The Backpack Project, and it depends on donations from area businesses, organizations, and individuals, as well as grant opportunities.